

CLAIMS ONLY							Application Number <b>10-052472</b>		Filing Date <b>8-9-04</b>	
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	
1	/	/					51			
2		/					52			
3		/					53			
4	/						54			
5		/					55			
6		/					56			
7		/					57			
8		/					58			
9		/					59			
10		/					60			
<del>11</del>							61			
<del>12</del>							62			
13		/					63			
14		/					64			
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41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep	3						Total Indep			
Total Depend	12						Total Depend			
Total Claims	15						Total Claims			

BEST AVAILABLE COPY